



FOR OFFICE USE
Accounting Code: **SI**

**CITY OF SUGAR LAND
PLANNING DEPARTMENT
APPLICATION FOR COMMERCIAL SITE PLAN PACKAGE**

**RETURN YOUR SUBMITTAL TO THE PLANNING DEPARTMENT (Attn: Development Review Coordinator)
SUGAR LAND CITY HALL, 2700 TOWN CENTER BLVD. NORTH, SUGAR LAND, TX 77479, PHONE#: (281) 275-2218**

PROJECT NAME _____

Project Location _____

Address _____

Proposed Use _____

Square Feet of Structure(s) _____ Zoning _____

Utilities Constructed by _____ Maintained by _____

OWNER/AGENT

Contact/Company _____

Address _____

Phone _____ Fax _____

Email _____

ARCHITECT/ENGINEER

Contact/Company _____

Address _____

Phone _____ Fax _____

Email _____

This is to certify that the information on this form is COMPLETE, TRUE and CORRECT and the undersigned is authorized to make this application. **This application will expire in six (6) months from the date of submittal if the Planning Department has not received a resubmittal.**

X _____

Signature of Applicant

Date

COMMERCIAL SITE PLAN PACKAGE SUBMITTAL REQUIREMENTS:

- **SIX (6) COMPLETED APPLICATIONS**
- **SUBMITTAL FEES:**
 - ☐ ETJ - \$500
 - ☐ CITY – NO FEE (FEE IS PAID AT PERMITTING)
- **SIX (6) 24 X 36 PRINTS THAT INCLUDE:**
 - ☐ COVER SHEET (W/ VICINITY MAP, ADDRESS)
 - ☐ OVERALL SITE PLAN (INCLUDE 200' FEET AROUND THE PROPERTY LINES, DRIVEWAYS, MEDIANS)
 - ☐ RECORDED PLAT OR PLAT IN REVIEW PROCESS (AS APPLICABLE)
 - ☐ BUILDING ELEVATIONS (BLACK OR BLUELINE / COLOR NOT REQUIRED)
 - ☐ ENGINEERING CIVIL DESIGN DRAWINGS (MUST BE SIGNED & SEALED BY A PROFESSIONAL ENGINEER) INCLUDING PAVING, WATER, & SANITARY SEWER LAYOUT, AND DETAIL SHEETS
 - ☐ LANDSCAPING & IRRIGATION PLAN
 - ☐ BUILDING FINISHES WORKSHEET (UNLESS IN M-1, M-2 ZONING DISTRICTS)



ACCESSORY STRUCTURE BUILDING FINISH WORKSHEET (Dev. Code, Ch. 2, Art. II)

Business Office (B-O)

*These apply to each wall

Primary Finish: 85% Req. Min.
Masonry (brick) _____ %
Glass Wall _____ %
Combination _____ %
Concrete w/ relief _____ %

Secondary Finish: 15% Max.
Split Face CMU _____ %
E.I.F.S _____ %
Fiber Reinforced _____ %
Cement Exterior _____ %
Wood Materials _____ %
Combination _____ %
Cementitious _____ %
Stucco _____ %

Plan Reviewer: _____

Nonresidential within residential districts

*These apply to each wall

Primary Finish: 85% Req. Min.
Masonry (brick) _____ %
Glass Wall _____ %
Combination _____ %
Concrete w/ relief _____ %

Secondary Finish: 15% Max.
Split Face CMU _____ %
E.I.F.S _____ %
Fiber Reinforced _____ %
Cement Exterior _____ %
Wood Materials _____ %
Combination _____ %
Cementitious _____ %
Stucco _____ %

Plan Reviewer: _____

Neighborhood Business (B-1)

*These apply to each wall

Primary Finish 70% Req. Min.
Masonry (brick) _____ %
Glass Wall _____ %
Combination _____ %
Cementitious _____ %
Stucco _____ %
Concrete w/ relief _____ %

Secondary Finish: 30% Max.
Split Face CMU _____ %
E.I.F.S _____ %
Fiber Reinforced _____ %
Cement Exterior _____ %
Wood Materials _____ %
Combination _____ %

Plan Reviewer: _____

General Business (B-2)

*These apply to each wall

Primary Finish 70% Req. Min.
Masonry (brick) _____ %
Glass Wall _____ %
Combination _____ %
Cementitious _____ %
Stucco _____ %
Concrete w/ relief _____ %

Secondary Finish: 30% Max.
Split Face CMU _____ %
E.I.F.S _____ %
Fiber Reinforced _____ %
Cement Exterior _____ %
Wood Materials _____ %
Combination _____ %

Plan Reviewer: _____

If applicable:

Alternate material approved by the Planning Director: _____

Director's Signature _____ Date of approval: _____



PRIMARY STRUCTURE BUILDING FINISH WORKSHEET (Dev. Code, Ch. 2, Art. II)

Business Office (B-O)

*These apply to each wall

Primary Finish: 85% Req. Min.
 Masonry (brick) _____ %
 Glass Wall _____ %
 Combination _____ %
 Concrete w/ relief _____ %

Secondary Finish: 15% Max.
 Split Face CMU _____ %
 E.I.F.S _____ %
 Fiber Reinforced
 Cement Exterior _____ %
 Wood Materials _____ %
 Combination _____ %
 Cementitious
 Stucco _____ %

Plan Reviewer: _____

Nonresidential within residential districts

*These apply to each wall

Primary Finish: 85% Req. Min.
 Masonry (brick) _____ %
 Glass Wall _____ %
 Combination _____ %
 Concrete w/ relief _____ %

Secondary Finish: 15% Max.
 Split Face CMU _____ %
 E.I.F.S _____ %
 Fiber Reinforced
 Cement Exterior _____ %
 Wood Materials _____ %
 Combination _____ %
 Cementitious
 Stucco _____ %

Plan Reviewer: _____

Neighborhood Business (B-1)

*These apply to each wall

Primary Finish 70% Req. Min.
 Masonry (brick) _____ %
 Glass Wall _____ %
 Combination _____ %
 Cementitious
 Stucco _____ %
 Concrete w/ relief _____ %

Secondary Finish: 30% Max.
 Split Face CMU _____ %
 E.I.F.S _____ %
 Fiber Reinforced
 Cement Exterior _____ %
 Wood Materials _____ %
 Combination _____ %

Plan Reviewer: _____

General Business (B-2)

*These apply to each wall

Primary Finish 70% Req. Min.
 Masonry (brick) _____ %
 Glass Wall _____ %
 Combination _____ %
 Cementitious
 Stucco _____ %
 Concrete w/ relief _____ %

Secondary Finish: 30% Max.
 Split Face CMU _____ %
 E.I.F.S _____ %
 Fiber Reinforced
 Cement Exterior _____ %
 Wood Materials _____ %
 Combination _____ %

Plan Reviewer: _____

If applicable:

Alternate material approved by the Planning Director: _____

Director's Signature _____ Date of approval: _____

City of Sugar Land
Traffic Impact Analysis (TIA) Threshold Worksheet

Complete this form as an aid to determine if your project requires a Traffic Impact Analysis.

Project Name: _____

Location: _____

Applicant/Contact: _____

Contact Phone Number: _____ Contact Email: _____

Application Type (check one):

_____ Zoning (CUP/PD) _____ Site Plan _____ Plat _____ Other: _____

Anticipated Land Use	Units*	ITE Code	ITE Trip Rates / Trips Generated			
			Daily Total	AM Peak Hour	PM Peak Hour	Weekend Peak Hour
			/	/	/	/
			/	/	/	/
			/	/	/	/

* Units should be based on what is used for the trip generation rate (ie. Gross Floor Area, Acreage, etc), be sure to specify in the box.

All Trips generated should be based on the latest edition of the ITE Trip Generation Manual.

All thresholds to determine when a TIA is necessary are contained in the City of Sugar Land's **Traffic Impact Analysis Guidelines** which is available on the City website www.sugarlandtx.gov. Go to the Engineering Department then click on Design Standards.

Applicant's Signature: _____

Date: _____

CITY OF SUGAR LAND
PLANNING DEPARTMENT
Site Plan Package Graphic Requirements

(Submittals must be received by 10:00 am Each Monday)

What is a site plan package?

A site plan package is an accurately scaled development plan set that illustrates the existing conditions on a land parcel as well as depicting details of a proposed development.

Site plans are required for all non single-family residential developments in the city and the extraterritorial jurisdiction. Site plans shall be submitted for review and approval prior to the issuance of applicable building or slab permits. The purpose of the site plan is to allow the staff to review issues such as traffic, land use, environmental, conformance to the comprehensive plan, utilities, and the property's relationship to adjoining subdivision or properties.

Site Plan Package Submittal Requirements

The City of Sugar Land requires the following pages of information for site plan submittal.

1. Cover Sheet
2. Recorded Plat (or plat in review process)
3. Overall Site Layout (include property lines and street layout within 200')
4. Building Elevations (demonstrate compliance with Ch. 2, Art. X of the Development Code)
5. Engineering Civil Designs including Paving & Drainage, Water & Sanitary Sewer, COSL standard Detail Drawings from Engineering Design Standards.
6. Landscaping and Irrigation

What is required on the Cover Page?

- Name and address of project (Address must be obtained before site plan approval can be given)
- Name, Address and phone number of applicant
- Name, Address and phone number of owner
- Vicinity map

What are the graphic requirements for the Overall Site Layout?

Site plans should address the entire platted lot and should show dimensions of the following:

- Proposed and existing structures, including fences
- Parking analysis (parking required v. parking provided)
- Parking and driveway aisles
- Required setbacks
- Street and Lot layout
- Zoning district designation and legal description
- Vehicle circulation plan
- Adjacent property lines, streets, with median openings and driveways within 200'

What graphic details and information should accompany the Building Elevations?

- Detailed list of materials used for Primary and Secondary Finishes
- Screen walls, wing walls, columns, and similar building extensions labeling their material composition
- Proposed percentages for the Exterior Finish (complete and submit attached “Composition Sheet”)
- Show correct building heights in compliance with Development Code of the City of Sugar Land

What graphic requirements are required in the Landscape Sheet?

- Landscape plan as per Development Code, Chapter 3
- Show dimensions of landscaped areas and islands
- Plant materials, including height and crown spread of new and existing plants
- Tree preservation procedures (if applicable)
- Irrigation plan information

What is required in the Engineering Civil Design Sheets?

- Water lines and fire hydrants, existing and proposed. Show proposed lines bolder than existing and label.
- Sanitary sewer lines and manholes existing and proposed. Show proposed lines bolder than existing and label as well.
- Storm sewer lines, manholes and inlets existing and proposed. Show proposed lines bolder than existing and label as well. Acknowledge storm sewer connection to public conveyance and note where the detail of the connection can be found.
- Detention pond, if applicable. Additional detail sheets will be required if detention is warranted. Additional sheets would include plan and profile of the facility and details describing the inlet and outfall appurtenances.
- All applicable notes to the contractor pertaining to water, sanitary, storm and paving

Water and Sanitary Sewer Sheets

- Size and location of existing water lines and fire hydrants. Show the meter vault easement if needed. Bold line for proposed and lighter lines for existing.
- Size, type, and grade of the sanitary sewer lines and any existing and proposed manholes

Paving and Drainage Sheets?

- Drainage calculations for the three and 100 year events signed and sealed by a registered professional engineer.
- Drainage system must comply with Fort Bend County Drainage Criteria Manual.
- Size, type, and slope of pipe and connection to public conveyance. Note the installation will conform to City of Sugar Land Design Standards.
- Overall area and drainage area boundaries and flow per inlet
- Existing elevations and enough adjoining property elevations to ascertain the general drainage pattern. Show top of pavement and curb elevations as needed.
- Address any adjoining property drainage issues that may be affected by the proposed improvements. For example if the adjoining property is affected show how this was handled.
- Driveway width and radius and include sidewalks

City of Sugar Land Construction Detail Drawings?

Please refer to the rear of the Sugar Land Design Standards for requirements for Construction Detail Drawings. *
Located on website*

What is required in the Traffic Analysis?

Some sites require a Traffic Impact Analysis. A TIA worksheet is required to be completed for determination. Please contact the City of Sugar Land Engineering Department at (281) 275-2780 for more information.

What do I do to submit a site plan for review?

Submit site plan review package to the Development Review Coordinator

6 sets of the site plan sheets described previously

6 copies of the completed application form

Do not submit Mechanical, Electrical, and Plumbing (MEP) Drawings with Site Plan package. Those drawings will be reviewed when submitting for the Building Permit package.

What is the process for site plan review?

1. When submitted, site plans are routed to Engineering, Planning, Public Works and Fire Dept.
2. Staff review takes approximately 14-30 days. Review time may change depending on the site.
3. Staff comments are returned to the applicant (Usually Friday on the third week in process).
Applicant corrects site plans and returns to the city.
4. Staff reviews (clears) corrected site plan package. If all comments have not been addressed, the applicant will be notified to make corrections and resubmit the Site Plan packages
5. 5 clean sets of copies with recorded plat are needed for City approval. One approved copy will be returned to the applicant
5. Once the Site Plan package is approved and applicant may proceed with the building permit process through the Building Permits and Inspections Department (281) 275-2270.



INDUSTRIAL PRETREATMENT QUESTIONNAIRE

PLEASE COMPLETE THIS FORM AND RETURN TO:

Polly Witte
City of Sugar Land
P.O. Box 110
Sugar Land, TX 77487-0110

Please answer the following:

1. Name of Business: _____ Telephone: _____
2. Location: _____
Mailing Address: _____
3. Owner: _____
4. Type of Business: _____
5. On-site processes: _____
6. Water Customer Account Number: _____
7. Federal SIC number: _____
8. Waste process: _____
9. Major Chemicals Used: (soaps, detergents, caustics, solvents, acids, metal salts, cyanides)

10. Water Source (check): City _____ Metered _____ Private Well _____ Unmetered _____
11. Method of Wastewater Disposal: (Check all that apply.)
City Sewer _____ Septic Tank _____ Haul _____ Other _____
12. Wastewater estimated to be discharged in sewer system on operating days:
Maximum _____ GPD Minimum _____ GPD Average _____ GPD
Check One: Domestic _____ Industrial _____ Both _____
13. Volume of Grease Trap: _____ Volume of Sand Trap: _____
Water Volume of Settling Tank: _____ gallons

Other: (Describe) _____
Served By: _____ Telephone: _____
Address: _____ Frequency: _____

14. Other Wastes:

Are there any liquid wastes generated and disposed of in the sewer system? Yes___ No___

If yes, these wastes may be best described as:

___ Inks/Dyes	___ Paints
___ Trace Metals	___ Pesticides
___ Oil and Grease	___ Plating Wastes
___ Organic Compounds	___ Solvent Thinners
___ Acids or Alkalies	___ Pretreatment Sludge
___ Other Wastes: (Describe)	

Are there any liquid wastes or sludge disposed of by other means? Yes___ No___

If yes, describe: _____

For the aforesaid wastes, does your company practice:

___ On-Site Storage
___ On-Site Disposal
___ Off-Site Disposal

Services By: _____ Telephone: _____
Address: _____ Frequency: _____

I have personally examined and I am familiar with the information submitted in this document and attachments. Based upon by inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete.

Signature of Official: _____

Please Print Name: _____

Title: _____

Date: _____



CITY OF SUGAR LAND

WATER AND WASTEWATER EQUIVALENT CONNECTIONS

Project Name:		
Address:		City, State, Zip:
Legal Description:		
Previous/Current Use:	Proposed Use: <i>(Refer to the backside for this form)</i>	Unit of Measure:
Owner's Name:	Address:	City, State, Zip:
Owner's Contact Person:	Telephone: E-mail Address:	Fax:
Builder's Name:	Address:	City, State, Zip:
Builder's Contact Person:	Telephone: E-mail Address:	Fax:
Square Footage	SANITARY SEWER Lead Size	Water Meter Size (Inches)

I HEREBY CERTIFY THAT THE DATA PRESENTED ABOVE IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Printed Name Owner, Builder or Agent (Signature) Telephone Date

DEPARTMENT USE ONLY (DO NOT WRITE BELOW THIS LINE)

SERVICE AREA NO.: _____

TOTAL FLOW _____
DIVIDED BY 315 GPD = _____ TOTAL EQUIVALENT CONNECTIONS
COMPUTED BY: _____ DATE: _____

cc: Revenue Officer (Original)
Owner/Builder
Engineering Department

STANDARD SANITARY SEWER USAGE CATEGORIES

Circle the item that most accurately defines your business and fill in the quantity

<u>INTENDED/PREVIOUS USE:</u>		<u>UNIT OF MEASURE</u>	<u>INTENDED/PREVIOUS USE:</u>		<u>UNIT OF MEASURE</u>
A)	Residential Development			Cleaning Development (con't)	
	1. Single Family Residential	# of Units ____		reclaim (wand type)	# Bays ____
	2. Townhouse/Patio/Cluster Homes	# of Units ____		c. Commercial w/o reclaim	
	3. Duplex/Triplex	# of Units ____		(tunnel type)	# of Bays ____
	4. Fourplex	# of Units ____		d. Commercial w/ reclaim	
	5. Condominium	# of Units ____		(tunnel type)	# of Bays ____
	6. Apartment with Washer/Dryer	# of Units ____			
B)	Institutional Development		G)	Recreational Development	
	1. Church			1. Theater Indoor	# of Seats ____
	a. Sanctuary	# of Seats ____		2. Skating Rink	# Capita ____
	b. Administration Building	# Personnel ____		3. Bowling Alley	# of Lanes ____
	c. Day School Classroom	# Students ____		4. Swimming Pool	# of Swimmers ____
	2. School			5. Stadium	# of Seats ____
	a. Unspecified	# Students ____		6. Health Club/Spa w/Swimming Pool	
	b. Elementary	# Students ____		and/or whirlpool	# Member/Day ____
	c. Day Care Center	# Students ____		7. Health Club/Spa w/o	
	d. Residential	# Students ____		Swimming Pool and/or whirlpool	# Member/Day ____
	e. Dormitory	# Students ____		8. Racquetball Club	# of Courts ____
	3. Hospital	# of Beds ____	H)	Service Station Development	
	4. Nursing Home	# of Beds ____		1. Station w/service (maximum of	
	5. Prison	# Inmates ____		1000 GPD if no car wash)	# of Islands ____
C)	Office/Retail Development			2. Self Service Station	#Sq. Ft. ____
	1. Office Building	# Sq. Ft. ____	I)	Hotel/Motel Development	
	2. Retail Store	# Sq. Ft. ____		1. Hotel/Motel (excluding restaurant)	# of Rooms ____
D)	Restaurant Development			2. Hotel/Motel (w/kitchenettes)	# of Rooms ____
	1. Average Full Service 10-12 Hours	# of Seats ____	J)	Industrial Development	
	2. Twenty Four (24) Hour Full Service	# of Seats ____		1. Warehouse	# Sq. Ft. ____
	3. Tavern or Lounge (No Food Service)	# of Seats ____		2. Factory w/shower	# Capita ____
	4. Soda Fountain (Ice Cream Parlor)	# of Seats ____		3. Factory w/o shower	# Capita ____
	5. Fast Food Paper Plate Service	# of Seats ____		4. Factory Residential	# Capita ____
	6. Bakery	# Sq. Ft. ____		5. Industrial Laundry	# Capita ____
	7. Pizza Parlor	# of Seats ____		6. Clothes or Manufacturing	# Sq. Ft. ____
	8. Fast Food (No Seating)	# Sq. Ft. ____	K)	Transportation Terminal Development	
E)	Barber/Beauty Shop	# Shampoo Bowls ____		1. Transportation Terminal	
F)	Cleaning Development			(excluding restaurants)	# Passenger ____
	1. Washeteria (Based on 50 G/Wash and		L)	Other	
	10Washes/day)	# Machines ____		1. Film Processor	# Processor ____
	2. Carwash			2. Fire Station	# Personnel ____
	a. Individual Bay, self service			3. Funeral Homes	# Personnel ____
	w/o reclaim (wand type)	# Bays ____		4.	Technicolor One Hour
	b. Individual Bay, self service with				Photo # of Stores ____
				5. Irrigation	gal/yr ____
			M)	Not listed - call (281) 275-2780	